

UTILITY PATENT APPLICATION TRANSMITTAL <small>For new nonprovisional applications under 37 CFR 1.53(b)</small>		Attorney Docket No. END-810									
First Inventor: Jeffrey D Messerly Title: BLADES WITH FUNCTIONAL BALANCE ASYMMETRIES FOR USE WITH ULTRASONIC SURGICAL INSTRUMENTS											
I hereby certify that this correspondence is being deposited today with the United States Postal Service as Express Mail - Post Office to Addressee in an envelope addressed to: Assistant Commissioner for Patents, Box-Patent Application, Washington, DC 20231.											
Name: <i>Patricia A. Jara</i> Date: <u>January 14, 2002</u> Patricia A. Jara											
Express Mail Label No. ET068646764US		 1050 US PTO 04764									
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231									
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages: 37 <i>(Preferred arrangement set forth below)</i></p> <p><input checked="" type="checkbox"/> Descriptive Title of the Invention</p> <p><input checked="" type="checkbox"/> Cross Reference to Related Applications</p> <p>- Statement Regarding Fed sponsored R&D</p> <p>- Reference to sequence listing, a table, or a computer program listing appendix</p> <p><input checked="" type="checkbox"/> Background of the Invention</p> <p><input checked="" type="checkbox"/> Brief Summary of the Invention</p> <p><input checked="" type="checkbox"/> Brief Description of the Drawings <i>(if filed)</i></p> <p><input checked="" type="checkbox"/> Detailed Description</p> <p><input checked="" type="checkbox"/> Claim(s)</p> <p><input checked="" type="checkbox"/> Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s)/35 USC 113) Total Sheets 17</p> <p>5. <input type="checkbox"/> Oath or Declaration [Total Pages 3]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input checked="" type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: 09/957,174. which is a continuation of 09/412,257, which issued as U.S. Patent No. 6,325,811B1.</p> <p>Prior application information: Examiner: Group Art Unit:</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below</p> <p>Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA</p> <p>20. TELEPHONE CONTACT Verne E. Kreger, JR. Please direct all telephone calls or telefaxes to: Telephone: (513) 337-3295 Fax: (513) 337-8489</p> <p>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</p> <table border="1"> <tr> <td>NAME</td> <td>Verne E. Kreger, JR.</td> <td>Reg. No. 35,231</td> </tr> <tr> <td>SIGNATURE</td> <td colspan="2"><i>Verne E. Kreger, Jr.</i></td> </tr> <tr> <td>DATE</td> <td colspan="2">January 14, 2002</td> </tr> </table>			NAME	Verne E. Kreger, JR.	Reg. No. 35,231	SIGNATURE	<i>Verne E. Kreger, Jr.</i>		DATE	January 14, 2002	
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DATE	January 14, 2002										

FEE TRANSMITTAL

Complete if Known	
Application Number	
Filing Date	January 14, 2002
First Named Inventor	Jeffrey D. Messerly
Group Art Unit	
Examiner Name	
Attorney Docket Number	END-810

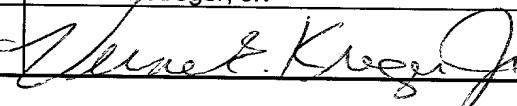
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$740.00
TOTAL CLAIMS	18- 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$740.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/END-810/VEK in the amount of \$740.00. Three copies of this sheet are enclosed.
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SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Verne E. Kreger, Jr.	Reg. No. 35,231
Signature		Date: 01/14/02 Deposit Account No. 10-0750